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PTO/SB/01 (10-00)

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**DECLARATION
AND
POWER OF ATTORNEY
FOR UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Declaration Submitted after
Initial Filing OR Initial Filing (Surcharge
(37 CFR 1.16(e)) required)

Attorney Docket Number	JAB 1690f-PCT-USA
First Named Inventor	Andrés-Gil, José Ignacio
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SUBSTITUTED AMINO ISOXAZOLINE DERIVATIVES AND THEIR USE AS ANTI-DEPRESSANTS

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
02076239.9	EP	04/02/2002	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	□	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Patented Patented Patented

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Practitioner(s) named below:
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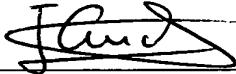
Name:

Address:

Address:

City:	State:	ZIP
Country	Telephone:	Fax:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) <u>José Ignacio</u>		Family Name or Surname <u>Andrés-Gil</u>		
Inventor's Signature 		Date <u>July 2nd, 2004</u>		
Residence: City <u>Madrid</u>	State	Country <u>Spain</u>	Citizenship <u>Spain</u>	
<u>EJX</u>				
Mailing Address Janssen-Cilag, S. A., Edificio Johnson & Johnson, Paseo de las Doce Estrellas, 5-7, Campo de las Naciones, 28042 Madrid, Spain				
City <u>Madrid</u>	State	ZIP <u>28042</u>	Country <u>Spain</u>	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) <u>Manuel Jesús</u>		Family Name or Surname <u>Alcázar-Vaca</u>		
Inventor's Signature 		Date <u>July 6th, 2004</u>		
Residence: City <u>Toledo</u>	State	Country <u>Spain</u>	Citizenship <u>Spain</u>	
Mailing Address Janssen-Cilag, S. A., Edificio Johnson & Johnson, Paseo de las Doce Estrellas, 5-7, Campo de las Naciones, 28042 Madrid, Spain				
City <u>Madrid</u>	State	ZIP <u>28042</u>	Country <u>Spain</u>	

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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) <u>Margaretha Henrica Maria</u>		Family Name or Surname <u>Bakker</u>		
Inventor's Signature		Date		
Residence: City <u>Alsbach-Haehnlein</u>	State	Country <u>Germany</u>	Citizenship <u>Netherlands</u>	
Mailing Address Janssen Pharmaceutica N.V. , Turnhoutseweg 30, 2340 Beerse, Belgium				
City <u>Beerse</u>	State	ZIP <u>2340</u>	Country <u>Belgium</u>	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) José Ignacio		Family Name or Surname Andrés-Gil		
Inventor's Signature		Date		
Residence: City Madrid	State	Country Spain	Citizenship Spain	
Mailing Address Janssen-Cilag, S. A., Edificio Johnson & Johnson, Paseo de las Doce Estrellas, 5-7, Campo de las Naciones, 28042 Madrid, Spain				
City Madrid	State	ZIP 28042	Country Spain	
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NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Manuel Jesús		Family Name or Surname Alcázar-Vaca		
Inventor's Signature		Date		
Residence: City Toledo	State	Country Spain	Citizenship Spain	
Mailing Address Janssen-Cilag, S. A., Edificio Johnson & Johnson, Paseo de las Doce Estrellas, 5-7, Campo de las Naciones, 28042 Madrid, Spain				
City Madrid	State	ZIP 28042	Country Spain	
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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Margaretha Henrica Maria		Family Name or Surname Bakker		
Inventor's Signature	Date 22 June 2004			
Residence: City Alsbach-Hähnlein	State DE	Country Germany	Citizenship Netherlands	
Mailing Address Janssen Pharmaceutica N.V., Turnhoutseweg 30, 2340 Beerse, Belgium				
City Beerse	State	ZIP 2340	Country Belgium	

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NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) <u>Ana, Isabel</u>		Family Name or Surname <u>De Lucas Olivares</u>		
Inventor's Signature <u>Lea J. de Lucas</u>		Date <u>2 - JULY - 2004</u>		
Residence: City <u>Toledo</u>	State <u>ES</u>	Country <u>Spain</u>	Citizenship <u>Spain</u>	
Mailing Address Janssen-Cilag, S. A., Edificio Johnson & Johnson, Paseo de las Doce Estrellas, 5-7, Campo de las Naciones, 28042 Madrid, Spain				
City <u>Madrid</u>	State	ZIP <u>28042</u>	Country <u>Spain</u>	
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NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Inventor's Signature		Date		
Residence: City	State	Country	Citizenship	
Mailing Address				
City	State	ZIP	Country	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
NAME OF SIXTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Inventor's Signature		Date		
Residence: City <u>Beerse</u>	State	Country	Citizenship	
Mailing Address				
City <u>Beerse</u>	State	ZIP <u>2340</u>	Country <u>Belgium</u>	

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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number	JAB 1690f-PCT-USA
		First Named Inventor	Andrés-Gil, José Ignacio
		COMPLETE IF KNOWN	
		Application Number	
		Filing Date	
		Group Art Unit	
		Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SUBSTITUTED AMINO ISOXAZOLINE DERIVATIVES AND THEIR USE AS ANTI-DEPRESSANTS

(Title of the Invention)

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YYYY) 03/27/2003 as United States Application Number or PCT International Application Number PCT/EP03/03245 and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
02076239.9	EP	04/02/2002	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

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Application Serial No.	Filing Date	Status
		Patented Patented Patented

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AND

Practitioner(s) named below:
Name Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Address:

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Country	Telephone:	Fax:

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NAME OF FOURTH INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Ana, Isabel	Family Name or Surname	De Lucas Olivares	
Inventor's Signature	Date		
Residence: City Toledo	State	Country Spain	Citizenship Spain

Mailing Address Janssen-Cilag, S. A., Edificio Johnson & Johnson, Paseo de las Doce Estrellas, 5-7, Campo de las Naciones, 28042 Madrid, Spain

City	Madrid	State	ZIP 28042	Country Spain
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NAME OF FIFTH INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])	Family Name or Surname		
Inventor's Signature	Date		
Residence: City	State	Country	Citizenship

Mailing Address

City	State	ZIP	Country
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NAME OF SIXTH INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])	Family Name or Surname			
Inventor's Signature	Date			
Residence: City Beerse	State	Country	Citizenship	
Mailing Address				
City	Beerse	State	ZIP 2340	Country Belgium